



**2018 Spencer Scholarship Application**  
**Grant Amount: \$1,000**

Please complete the application below. All fields are required.

**Personal Information**

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone Number (Home): \_\_\_\_\_

Phone Number (Cell): \_\_\_\_\_

Email Address: \_\_\_\_\_

Annual Family Income: \_\_\_\_\_ (Must be completed)

**School Information:**

School Currently Attending: \_\_\_\_\_ GPA: \_\_\_\_\_

Name of College That You Plan on Attending in the Fall:

\_\_\_\_\_

Anticipated Major: \_\_\_\_\_

